### **2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000003036

Entity Name: NORTHEAST FLORIDA GIRLS SOFTBALL, INC.

FILED Feb 24, 2020 Secretary of State 1445591365CC

# **Current Principal Place of Business:**

468 SOUTH PENMAN ROAD
JACKSONVILLE BEACH, FL 32250

## **Current Mailing Address:**

468 SOUTH PENMAN ROAD

JACKSONVILLE BEACH. FL 32250 US

FEI Number: 56-2354099 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

FILE FLORIDA CO 7000 W PALMETTO PARK RD. 210 BOCA RATON, FL 33433 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DAVID FELD 02/24/2020

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title SECRETARY, DIRECTOR Title **DIRECTOR** Name BITTNER, SANDY R Name STELLY, PAXTON Address 3616 SANCTUARY WAY S Address 14840 PLUMOSA DR City-State-Zip: JACKSONVILLE FL 32250 City-State-Zip: JACKSONVILLE BEACH FL 32250

TitleDIRECTOR, VPTitlePRESIDENT, DIRECTORNameABRAMS, SUSANNameROBERTS, MELISSA

Address 2324 COMPANION CIRCLE E Address 172 LA PASADA CIRCLE SOUTH

City-State-Zip: JACKSONVILLE FL 32224 City-State-Zip: PONTE VEDRA FL 32082

Title VP, DIRECTOR Title TREASURER, DIRECTOR
Name SIKES, JAMES Name BRATCHER, JAMES
Address 468 S PENMAN RD Address 468 S PENMAN RD

City-State-Zip: JACKSONVILLE FL 32250 City-State-Zip: JACKSONVILLE FL 32250

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MELISSA ROBERTS

**PRESIDENT** 

02/24/2020